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UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director
Assistance to the Government of Nicaragua
Support for a comprehensive population programme

Proposed UNFPA assistance:	$5.5 million, of which $3.4 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of $2.1 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.
Estimated value of the Government contribution:	To be determined
Duration:	Three years
Estimated starting date:	January 1994
Executing agencies:	Government of Nicaragua United Nations and United Nations agencies and organizations National and international non-governmental organizations (NGOs)
Government coordinating agency:	Ministry of External Cooperation

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Nicaragua

Demographic facts

Population (000)	
Total	4,433
Males	2,165
Females	2,268
Sex ratio (/100 females)	95.5
Urban	2,788
Rural	1,645
Per cent urban	62.9
Population in year 2000 (000)	5,169
Functional age groups (%)	
Young child: 0-4	17.3
Child: 5-14	28.6
Youth: 15-24	20.2
Elderly: 60+	4.7
65+	3.1
Percentage of women aged 15-49	46.5
Median age (years)	16.8
Dependency ratios: total	96.3
(/100) Aged 0-14	90.2
Aged 65+	6.1
Agricultural population density (/hectare of arable land)	1.1
Population density (/sq. km.)	34

Average annual change (000)	
Population increase	151
Births	164
Deaths	28
Net migration	15
Annual population total (% growth)	3.74
Urban	4.76
Rural	2.13
Crude birth rate (/1000)	40.5
Crude death rate (/1000)	6.8
Net migration rate (/1000)	3.7
Total fertility rate (/woman)	5.04
Contraceptive prevalence rate (% 15-44)	27
Gross reproduction rate (/woman)	2.46
Net reproduction rate (/woman)	2.10
Infant mortality rate (/1000)	52
Maternal mortality rate (/100,000)	47
Life expectancy at birth (years)	
Males	64.8
Females	68.5
Both sexes	66.7
GNP per capita U.S. dollars, 1991)	460

Sources: Population density on arable land is derived from The State of Food and Agriculture 1991 issued by the Food and Agriculture Organization of the United Nations; gross national product per capita: World Bank, World Development Report 1993. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1995; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of Economic and Social Information and Policy Analysis of the United Nations, World Population Prospects: The 1992 Revision. Figures for urban-rural average annual change are from World Urbanization Prospects 1992 and are five-year averages for 1990-1995. Figures for maternal mortality are for 1980-1990; figures for contraceptive prevalence rates are for currently married women aged 15-44. Both are from table 5 of World's Women: Trends and Statistics, 1970-1990, New York, United Nations, 1991 (ST/ESA/STAT/SER.K.8). Two dots (..) indicate that data are not available.

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I. EXECUTIVE PROGRAMME SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of $5.5 million, of which $3.4 million would be programmed from UNFPA's regular resources, over a five-year period, starting January 1994, to assist the Government of Nicaragua in achieving its population and development objectives. UNFPA would seek to provide the balance of $2.1 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.

2. The proposed programme has been developed in close cooperation with Nicaragua's Ministry of External Cooperation, which is in charge of coordinating all external assistance, and with the sectoral ministries concerned with population programmes. The proposed programme takes account of the results and recommendations of the Programme Review and Strategy Development (PRSD) mission that visited Nicaragua in November 1992. Other external assistance agencies and non-governmental organizations (NGOs) were consulted in the design of the programme.

3. The proposed programme would aim to achieve the following long-term goals: (a) strengthen the country's institutional capacity to plan and carry out its own population programmes and to include demographic variables in its social and economic development planning; and (b) lower fertility and maternal mortality rates by increasing the demand for, and ensuring the supply of, high-quality family planning services and contraceptives.

4. The main part of the resources of the proposed programme would be devoted to the areas of maternal and child health and family planning (MCH/FP) and basic data collection. The main goal of MCH/FP activities would be to increase the national coverage of family planning services by 10 per cent over the period of the programme. The emphasis would be on training personnel to carry out MCH/FP activities and helping to provide the country's contraceptive needs. Because of civil strife, there has been no census in Nicaragua since 1971. A major part of the proposed funding would therefore go towards supporting the next national census, which would serve as a baseline for all future development activities.

5. Nicaragua has the highest annual population growth rate of any country in the Americas, estimated at 3.7 per cent. The current population is estimated at 4.4 million. The national average total fertility rate is 5.0 children per woman, but, according to the Family Health Survey, this varies from 6.8 in rural areas to 3.2 in the capital city of Managua. There are severe imbalances in population distribution, with heavy densities in the Pacific region as a whole and with a concentration around Managua, where 30 per cent of the population lives. These imbalances have been exacerbated by widespread internal migration caused by years of civil conflict and disorder.

6. Civil strife, inappropriate economic policies and economic embargo have contributed to a deteriorating economic situation. In 1992, per capita gross domestic product was $435, the second lowest in Latin America, and it is estimated that 70 per cent of the population is living in poverty. The Government is trying to mitigate these difficulties by devoting resources to rehabilitating the social sector. This includes MCH/FP activities, but as yet the Government has not adopted an explicit population policy.

7. The level of contraceptive use in Nicaragua is moderately high: according to the Family Health Survey of 1992, 48.7 per cent of married women and women in union were using contraceptive methods. However, this average hides a wide disparity among different groups of the population: 62.7 per cent in Managua versus 27.8 per cent in mountainous rural areas; 60.5 per cent among women aged 35-39 versus 23.2 per cent for those 15-19; and 69.1 per cent among women who have completed secondary school versus 28.5 per cent of those with no formal education. The method most commonly used is female sterilization, which accounts for 38 per cent of all contraceptive methods; this is followed by oral contraceptives (26 per cent), IUDs (19 per cent), and condoms (5 per cent).

8. UNFPA began its assistance to Nicaragua in the mid-1970s with support for data collection. There have been three prior comprehensive programmes, the latest one beginning in 1988. Overall results have been much less than what was hoped for because of civil war, economic embargo, lack of economic resources and administrative experience, and the extreme political polarization that has characterized the country. Family planning programmes and data collection, in particular, suffered because of the lack of government commitment and resources.

9. The proposed programme would concentrate on these two areas. In the area of MCH/FP, UNFPA would provide support for training health personnel, especially those serving in rural areas, in family planning methods and counseling. UNFPA would also take the lead role, in collaboration with the United States Agency for International Development (USAID) and the World Bank, in meeting the country's contraceptive needs. Almost half of the proposed funds would go for these and other MCH/FP activities. There has been no national population census since 1971; therefore, a third of the proposed funding would help with carrying out the census scheduled for 1994.

10. Programme activities would focus on the needs of the most vulnerable populations, especially women in rural areas, since this sector of the population suffers the most from poverty and has the lowest levels of education and the least access to social services. The programme would also give special consideration to youth, both in urban and rural areas.

11. In addition to UNFPA, the lead agency in providing population services to Nicaragua has been USAID. This will continue during the period of the proposed programme: USAID is providing $5 million for a five-year family planning project with the NGO PROFAMILIA and $20 million over five years to the Ministry of Health for child survival and family planning activities. Given the size of USAID's funding, UNFPA will cooperate closely with that agency to see that a coordinated approach is carried out and that efforts are not duplicated.

12. The proposed programme would be managed by the UNFPA Country Director and the field office in Nicaragua in coordination with the Ministry of External Cooperation. All activities of the programme would have built-in monitoring and evaluation mechanisms, and independent evaluations would be a part of all larger and innovative projects. A mid-term programme review is anticipated in 1995. UNFPA would make full use of available and appropriate national and regional technical capacities, complemented by the UNFPA Country Support Team located in Santiago, Chile, and would strongly support the national execution of projects.

13. Recommendation. The Executive Director recommends that the Executive Board approve the programme for Nicaragua as presented below, subject to the availability of funds, and authorize the Executive Director to make the necessary arrangements for its management, funding and execution.

II. BACKGROUND

14. Demographic trends. Nicaragua has the highest annual population growth rate in the Americas, estimated at 3.7 per cent. Currently the population of the country is around 4.4 million. The majority (63.8 per cent) of the population lives in the Pacific region, which makes up only 15 per cent of the national territory. The Atlantic region, over half of the territory, is inhabited by only 5.4 per cent of the population.

15. The United Nations estimates the total fertility rate in Nicaragua to be 5.0 children per woman, one of the highest in Latin America. The fertility rate varies according to geographical areas and socio-economic status. According to the Family Health Survey, in the mountainous rural areas, the fertility rate is 6.8; in Managua it is 3.2. Women with less than a secondary education average 6.9 children; those with secondary education or higher have only 2.4. The only age group in which fertility has not declined in recent years is that of women 15-19 years of age. The birth rate in this group, 158 per 1,000 (1992), is thought to be the highest in Central America.

16. It is estimated that the infant mortality rate is 52 per 1,000 live births. However, survey results show considerably higher rates for rural areas. More than half of infant deaths are caused by respiratory and intestinal diseases, most of which are preventable. The Ministry of Health estimates maternal mortality at 150 per 100,000 live births, although it should be noted that estimates vary widely. High-risk pregnancies and abortion are the principal causes of maternal mortality. Only 38 cases of AIDS have been reported to date. However, the annual infection rate increased from 0.28 per million in 1987 to 2.0 per million in 1991, and it is thought that the shortage of blood-testing facilities is hiding the true extent of the problem.

17. An estimated 63 per cent of the population reside in urban areas. The urban population growth rate is 4.8 per cent annually. Over 30 per cent of the population is in Managua. Between 1980 and 1985 there was heavy migration to the Pacific region from other parts of the country as a result of the civil war. Since 1990 the repatriation of thousands of Nicaraguans and the demobilization of military troops have also caused migration toward the principal urban centres, where the expansion of slums has been significant.

18. Economic and social conditions. The country's economic situation deteriorated dramatically during the last decade owing to a combination of inappropriate economic policies, embargo, civil war, and natural disasters. As a result, Nicaragua is currently the second poorest country in Latin America with a per capita gross domestic product (GDP) of $435 (1992). An estimated 70 per cent of the population lives in poverty. Unemployment, combined with underemployment, affects 57 per cent of Nicaragua's labour force.

19. Since 1990, the new Government's principal goal has been to achieve economic stability through structural adjustment. However, owing to a political climate unfavourable for investment, unresolved property disputes, and two natural disasters, the economy has shown no signs of revitalization. The balance-of-payments account has sharply deteriorated in spite of the significant increase in donations and concessional loans from outside the country. In order to reduce the negative social impact of the structural adjustment measures, a programme of rehabilitation in the social sector is being implemented, including interventions in education, health, housing, and employment sectors.

20. Despite the efforts of the Government, social conditions in Nicaragua are still very difficult. In 1992, 21 per cent of school-age children were not enrolled in school, and more than 40 per cent of classrooms were considered to be inadequate. The illiteracy rate is 28 per cent among both men and women. In formal education, the enrolment of females exceeds that of males. However, such progress is not evident in the labour sector, where women play a secondary role to men and usually receive less pay for the same work.

21. There is limited access to health services, especially in the rural areas. Approximately 40 per cent of all births, and 60 per cent of births in rural areas, are not attended by a health worker. Only 31 per cent of women receive post-partum care while around 70 per cent receive prenatal care. The Government is establishing decentralized health service systems as a strategy to improve the quality of care and increase coverage of health services and to promote community participation. However, the health system infrastructure is weak and under-equipped, the logistics for distributing medicines problematic, and the number of personnel insufficient to meet the demand for services.

22. Government position on population. Even though the Government has not adopted an explicit population policy, the impact of demographic variables on development has increasingly been taken into account in economic and social planning and programming. While no explicit quantitative goals have been set, the aim is to reduce fertility and maternal mortality by strengthening the health system, increasing the availability of family planning services, and formulating education programmes to support these activities.

23. The Social Security and Welfare Institute has proposed to give priority consideration to pregnant adolescents, and the Ministry of Education has assumed a leadership role in reducing adolescent pregnancies through the implementation of an integrated sex education programme aimed at encouraging adolescents to postpone sexual activity.

24. Given the critical social needs, the Government has given special priority to strengthening its social programmes for the period 1993-1995. To this end, the Ministry of Social Action was created in 1993 to assure coherency in social activities and see that such activities are consistent with economic policies. One of the principal tasks of this new Ministry is to formulate a National Social Development Policy that includes a special chapter on population policy. Under the coordination of the Ministry of Social Action, a Cabinet of Social Area Ministries was established that includes the Ministry of Health, the Ministry of Education, the Ministry of Labour, the Ministry of Finance, the Social Security and Welfare Institute, and the National Institute of Sports. Since May 1993, the Social Cabinet has had a mandate to formulate a population policy and then to coordinate sectoral plans and programmes to implement that policy. A Technical Inter-Ministerial Commission on Population and a Population Secretariat were also established, under Ministry of Social Action coordination, to prepare and support all activities undertaken by the Social Cabinet.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

25. UNFPA's assistance to Nicaragua started in the mid-1970s with support for socio-demographic data collection. In 1980, the Governing Council approved the first comprehensive population programme for Nicaragua in the amount of $4 million for the period 1980-1983. Only $2.1 million was spent as a result of security problems that prevented the implementation of the population census planned for 1982.

26. In 1985 the Governing Council approved a programme of $6 million, including $4.8 million from multi-bilateral sources for MCH/FP. In 1988, a new programme was approved for 1989-1992 in the amount of $12.2 million, including $4.3 million in multi-bilateral funds for MCH/FP and $2 million for basic data collection.

27. The programmes were affected by extremely difficult circumstances: the civil war, economic embargo, lack of administrative experience, and the high level of political polarization contributed to an extraordinarily high rotation of personnel, a scarcity of economic resources for social programmes, and the lack of adequate planning. Moreover, UNFPA's representation in the field was too limited to deal with all the problems that occurred during programme implementation.

Maternal and child health and family planning

28. In the 1970s, family planning services in Nicaragua were provided by a single private institution. After 1980, the Ministry of Health, with UNFPA support, gradually integrated family planning into the services of its 700 health units. UNFPA assistance was complemented by multi-bilateral resources from Norway, Finland, and Italy. Between 1980 and 1991 UNFPA was the sole source for contraceptives and medical supplies for family planning, including for the various NGOs that incorporated family planning activities into their services.

29. In the 1980s, MCH activities were promoted at the expense of family planning. As a consequence, project resources were diverted away from family planning; training in family planning was neglected; and efforts to increase the demand for family planning services or to focus such services on priority areas and groups were non-existent.

Information, education, and communication

30. The Ministry of Education has been the principal channel for UNFPA assistance in information, education and communication (IEC) activities for population programmes. This assistance helped the Ministry to incorporate population education into the curricula of primary and secondary schools; train teachers; organize educational activities for parents; elaborate teaching materials; and disseminate radio messages on population themes. These activities were carried out by a small national team with the technical assistance of UNESCO. Owing to the small number of personnel, the training was limited both in terms of content of training and number of teachers trained.

31. In the non-formal education sector, a youth organization implemented sex education activities with UNFPA assistance. A National Commission on Sex Education was established, and such non-formal IEC activities as television and radio programmes, newspaper articles and workshops for adolescents were implemented successfully.

32. In 1990, the new Government decided to review all study programmes with revised orientations regarding population issues. Textbooks and teaching guides were also voided, and a new effort to revise the curriculum and to produce educational materials was initiated. This new orientation is also reflected in certain of the mass media, particularly in the country's newspapers.

Data collection and analysis

33. The last population census in Nicaragua was taken in 1971, but a large part of the information was lost in the earthquake that destroyed Managua in 1972. The political situation in the country impeded carrying out the population and housing census planned for 1982. In order to overcome the lack of information, UNFPA, with technical assistance from the United Nations, supported the National Institute of Statistics in carrying out the 1985 National Socio-Demographic Survey. There were considerable delays in the analysis of the information and publication of most of the studies because of weaknesses in project management, insufficient technical assistance, and lack of qualified personnel.

34. As part of national reconstruction activities, UNFPA is presently supporting, with the International Organization for Migration (IOM) as executing agency, the development of an information system on displaced populations and the populations most in need. This system will cover all municipalities in the country and is designed to serve as a planning instrument in the administrative decentralization process currently being promoted by the Government.

Population policy formulation

35. With the technical assistance of the Regional Employment Programme for Latin America and the Caribbean (PREALC), UNFPA supported the Secretariat of Planning and Budget in promoting the use of demographic variables in general, sectoral and regional planning. Project implementation suffered from lack of data and political support. The executing agency was mostly concerned about the employment aspects of population growth; as a consequence, awareness of the relationships between population and development was not promoted significantly. In 1991 the Secretariat of Planning and Budget was eliminated as part of the new Government's reorganization of the administrative structure.

Other external assistance

36. During the 1980s, Nicaragua received considerable international assistance from bilateral cooperation, the United Nations system and international banks. In the social sector, health and education were the main areas of focus. The Ministry of Health established 19 decentralized health service systems with financial support from the World Bank, UNICEF, USAID and the Governments of Sweden, Italy and the Netherlands. The programme included provision of primary health care, training in local management, development of human resources, reform of the procurement systems for medical supplies, and support for an information, supervision and monitoring system.

37. During the 1980s, the International Planned Parenthood Federation (IPPF) provided limited assistance for family planning activities through PROFAMILIA. USAID reinitiated its assistance to Nicaragua in June 1990, and during 1991 it provided small quantities of contraceptives to the Ministry of Health and PROFAMILIA. In 1992, it increased its assistance to the Ministry of Health and provided 1.2 million condoms and 486,000 cycles of oral contraceptives. It also supported the 1992 Family Health Survey. Currently, USAID is carrying out a five-year, $5 million family planning project with PROFAMILIA that covers operating and personnel costs, technical assistance, provision of contraceptives and medical supplies,

expansion of the community distribution system, and the development of a strategy for alternative systems for delivery of family planning services.

38. USAID is also preparing a bilateral project to support the Ministry of Health's child survival and family planning activities with approximately $20 million over a period of five years. The project will include assistance to implement the maternal and infant immunization programme, help control diarrhoeal diseases and acute respiratory infections, and provide family planning services. The International Development Bank is supporting human resources development, and is also financing a few programmes designed to improve hospital administration and to help renovate the physical infrastructure of some hospitals.

39. UNICEF cooperates with the Ministry of Health in supporting activities related to immunization, control of diarrhoeal and respiratory diseases, and the promotion of breastfeeding and nutrition. Activities related to the prevention of maternal mortality and the anti-tetanus vaccination of pregnant women have been coordinated with UNFPA-supported activities. It has also collaborated in revising curricula to incorporate family life and gender-related themes and promoted an adult literacy programme, with special emphasis on young women.

40. The Swedish International Development Authority (SIDA) is assisting the Ministry of Health in implementing Safe Motherhood activities and in developing community-based projects in reproductive health. The Norwegian Agency for International Development (NORAD) is supporting national NGOs and the Ministry of Health in working to improve conditions for women. The Finnish International Development Agency (FINNIDA) is supporting a Pan-American Health Organization project focusing on women, health, and development. The Danish International Development Agency (DANIDA) is supporting efforts to restructure the system of distribution for medicines as well as projects to improve conditions for women. Germany has supported family planning activities, including sex education, in a hospital in Managua.

IV. PROPOSED PROGRAMME 1994-1996

41. UNFPA's proposed programme for the period 1994-1996 takes into a consideration the strategies proposed by the PRSD mission carried out in November of 1992 as well as developments in the country after the mission was completed. The beginning of the programme will coincide with the formulation and execution of a national social development plan. In order to harmonize programming cycles, the UNFPA programme will conclude at the same time as the UNDP, UNICEF and World Food Programme (WFP) programmes which cover the period 1992-1996. The Fund will take care to ensure that the activities developed under this programme are closely coordinated with those of other agencies. The recently started preparation of the Country Strategy Note will serve as a mechanism that will facilitate this aim.

42. The immediate objectives of the programme are to contribute to: (a) improved quality and extended coverage of reproductive health and family planning services; (b) changes in knowledge, attitudes, values, and practices that will encourage responsible parenthood and a decrease in fertility rates, especially among adolescents; (c) formulation and implementation of an integrated population policy; (d) increased awareness of population concerns among social, political and community leaders and among women's organizations; (e) improved and updated demographic information for development programming, giving due consideration to gender issues; and (f) increased participation of community organizations, particularly women's organizations, in implementing population education activities and providing reproductive and family planning services.

43. Programme activities would focus on the needs of the most vulnerable populations, especially women in rural areas, since this sector of the population suffers the most from poverty and has the lowest levels of education and the least access to social services. The programme would also give special consideration to youth, both in urban and rural areas.

44. The programme would place special emphasis on the development of institutional capacities by training staff in pertinent areas. National execution would be encouraged, including that by national NGOs. The programme would also promote decentralization in the implementation of activities and stress, inter alia, community participation, in particular of women's organizations in all phases of programme activities; quality of technical assistance; the absorptive capacity of national counterpart institutions; monitoring and evaluation mechanisms; and greater coordination with other donors.

45. All projects in the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice, and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14 (f)).

Maternal and child health and family planning

46. In the area of MCH/FP, the programme seeks to improve the quality of care, increase the demand for reproductive health and family planning services, and extend the coverage of family planning services by 10 per cent during its three-year period.

47. Considering the present low quality of reproductive health services, especially in rural areas, the programme would focus on providing various types of training for personnel involved in MCH/FP activities. This would include: (a) in-service training for physicians, nurses, and auxiliary nurses to equip them to provide family planning information and counselling that take gender concerns into account; (b) basic training in reproductive health and family planning for medical and nursing students that pays close attention to the sociocultural and psycho-social aspects of family planning; and (c) training for health workers/community volunteers, the majority of whom are women, to enable them to integrate IEC components dealing with reproductive health and family planning into their promotional activities, to distribute barrier and hormonal contraceptives, to provide counselling in HIV/AIDS prevention and to make referrals to health centres.

48. Since an important women's organizational network already exists, especially at the grass-roots level, the programme would promote systematic cooperation between these organizations and the Ministry of Health's health centres and posts in the areas of training, referral and follow-up on family planning users. UNFPA would also support sociocultural research on current and potential family planning users in order to increase the acceptability and quality of family planning services and to promote wider community participation.

49. Given the economic crisis in the country, UNFPA would contribute to ensuring the adequate provision of family planning methods, taking into account the demand that will be created by the proposed IEC activities. The demand for the period 1994-1996 is estimated as follows: 1.65 million cycles of oral contraceptives for the public sector and 2.28 million cycles for the private sector; 30,000 IUDs for the public sector and 12,000 IUDs for the private sector; 2.6 million condoms for the public sector and 5.4 million for the private sector; and 8,600 female sterilizations to be provided by the public sector and 2,300 by the private sector. The total cost of condoms, oral contraceptives and IUDs for the period 1994-1996 is estimated to be approximately $1.5 million, taking into account that at least 50 per cent of the 1994 supplies are already in stock. UNFPA proposes to undertake a study with other donors, especially USAID and the World Bank, on how to meet this demand and will provide a portion of the contraceptives needed. The programme would also seek to ensure the availability of a broader variety of contraceptives, including the introduction of new methods such as Norplant and male sterilization.

50. UNFPA will participate in the coordination mechanisms that are being established by the Ministry of Health to strengthen the reproductive health and family planning activities carried out by the decentralized

health service systems. The Fund will have a fundamental role in generating demand for family planning services. In addition, the programme would support family planning activities within the framework of projects funded by UNICEF to help prevent maternal mortality, and by WFP to provide food for work and to establish child care centres. Moreover, the programme would seek to include population information in the human resource development activity that the IDB is supporting.

51. UNFPA proposes to provide $2.3 million for activities in the area of MCH/FP, of which $1.5 million would be funded from the regular resources of UNFPA. Of this $1.5 million, approximately $70,000 would be earmarked to cover the cost of national programme support staff to assist in developing and monitoring activities in this area and to support capacity building for national execution and donor coordination. Of the remaining amount, it is estimated that 25 per cent would be used to provide contraceptives; 30 per cent for activities with community and women's organizations; 40 per cent for education and training; and 5 per cent for sociocultural research.

Information, education, and communication

52. UNFPA proposes to provide $500,000 to this sector in order to increase awareness among opinion leaders, government officials, political leaders and community agents about population issues and their impact on development and the quality of life of the country's inhabitants. The programme would also provide training in population issues to social communicators and stress the integral role of a national population policy in a strategy for sustainable development. Aside from special events such as seminars, lectures, and workshops, the media would be utilized for public information activities, taking into account that newspapers have a good coverage in urban centres and that radio reaches a wide audience in both urban and rural areas. Approximately $60,000 would be earmarked for hiring national programme support staff to assist in awareness creation activities.

53. The programme seeks to ensure that all educational levels, in particular the primary level, not only allow students to acquire knowledge about family life but also promote changes in values and attitudes in relation to gender, sexuality, reproductive behaviour, and HIV/AIDS prevention. Such activities are crucial to creating awareness of reproductive behaviour and responsible parenthood. The programme would also provide assistance to incorporate and strengthen population contents in the school curricula, produce teaching materials, provide in-service training for primary and secondary school teachers and incorporate population education in study programmes at the university level.

54. The programme would also make use of non-formal channels (community workers, rural women's organizations, etc.) to reach youth and adolescents, particularly females in rural areas, who prematurely left or never attended school. A related activity would be to design special information components on reproductive health and family planning, AIDS prevention, responsible parenthood and gender issues that can be used in rural development projects supported by other donors.

55. UNFPA would pay special attention to coordinating its activities with those of agencies and organizations carrying out information programmes to promote social development, in particular with UNICEF in promoting the rights of children and women, in carrying out literacy campaigns, and in implementing family life education activities. The Fund would also ensure coordination with the Government of the Netherlands and with USAID in the area of curriculum design and teacher training and with FAO and IFAD in relation to rural development communication projects.

Data collection and analysis

56. In this area, the programme would promote greater availability of socio-demographic data and information for use in the formulation of development policies, programmes and projects of public and private sectors. Considering that the only demographic data collection activity carried out in the last 20 years was the national socio-demographic survey of 1985, the programme would concentrate the bulk of its support in this

sector on the population census, which is planned for 1994. UNFPA would provide assistance to train staff of the National Institute of Statistics in such areas as data processing, manual and census instrument design, and demographic analysis. The Fund would arrange for technical assistance through its Country Support Team located in Santiago, Chile, and encourage technical cooperation among developing countries (TCDC) in the areas related to census organization, data processing and training. UNFPA would also assist the Government in seeking technical and financial assistance to develop a system of vital statistics.

57. UNFPA proposes to provide $1 million from regular resources for the population census and to seek an additional to $1 million from bilateral sources that would be channeled through the Fund. Given that a total of $3.5 million is required from external funding, UNFPA would actively cooperate with the Government in seeking additional financing of $1.5 million from such sources as the World Bank, IDB, and the Governments of Sweden, Japan and the United States. UNDP plans to provide $250,000 for census activities.

Population dynamics

58. UNFPA assistance would seek to enhance the understanding of the interrelationships between population and the development process. The programme would include assistance to the National University of Nicaragua to support its activities in developing study programmes that create awareness of population issues, including population dynamics, development and environment, and migration and urbanization. Special consideration would be given to the situation of women in these activities. The programme would also support the University in sociocultural and action-oriented research on selected topics, such as population and environment and adolescent pregnancies.

59. To support these efforts, the programme would promote an exchange of information and bibliographic resources between the University and academic institutions in other countries. Research in the area of adolescent pregnancy would be carried out in close collaboration with the activities promoted by UNICEF in the fields of youth, maternal health, and women in development. In addition, it is anticipated that the programme would coordinate efforts with USAID and PROFAMILIA in developing a computer model for Nicaragua to help highlight the relationship between population and development.

60. UNFPA would provide a total of $250,000 for population and development activities, of which $150,000 would be sought from other sources, including multi-bilateral sources.

Population policy formulation

61. The programme would support government efforts to formulate a population policy and establish an adequate institutional base to design and implement that policy. The need for such a policy has been recently supported by several ministries and institutions including the Ministry of Health, the National Women's Institute, the Ministry of Social Welfare, the Ministry of Social Action, the Ministry of the Economy, and the Ministry of Finance. The proposed programme would support the National Population Commission, created by the Cabinet of Social Area Ministers, to ensure that demographic factors are included in social and economic policies and programmes and to formulate a population policy.

62. In order to obtain strong popular and political support for a national population policy, the programme would support IEC activities designed to improve people's understanding of the interrelationships between population dynamics, social and economic development, and the environment. In this area, the programme anticipates a close collaboration with the National University of Nicaragua, USAID and PROFAMILIA both in making use of the available human and technical resources and computer software and in disseminating the knowledge that is gained. The proposed programme includes $100,000 from UNFPA regular resources to support these activities.

Women, population and development

63. The proposed programme would contribute to strengthening the role of women in Nicaraguan society by increasing the participation of women in developing programme activities and by including gender considerations in all population activities. The activities would be especially targeted to improving the situation of women in rural and marginal urban areas. UNFPA would assist in strengthening the technical capacity of government institutions that deal with women's issues. It would also promote the incorporation of reproductive health and family planning in the agendas of women's NGOs, and a closer coordination among them. It would support collection and analysis of demographic information disaggregated by gender in order to enhance the understanding of the situation of women.

64. The programme would complement UNICEF's efforts to enhance the institutional capacity of the Nicaraguan Women's Institute, as well as its assistance to the Women's Consultative Committee, created by the Presidency of the Republic. The programme would also coordinate efforts with the FAO rural women's project by incorporating family planning in the training of female farmer leaders and in the training components of its reforestation and communication programmes.

65. UNFPA would provide $250,000 for activities in the area of women, population and development, of which $150,000 would be sought from other sources, including multi-bilateral sources.

Programme reserve

66. The amount of $100,000 from UNFPA regular resources would be held in reserve to cover unforeseen activities that may be developed during the course of the programme.

Programme coordination

67. The proposed programme activities would be coordinated by the Ministry of External Cooperation on behalf of the Government. The National Population Commission established by the Cabinet of Social Area Ministries, under the secretariat of the Ministry of Social Action, would seek to strengthen coordination and follow-up mechanisms. Additionally, periodic meetings of the representatives of population projects would be held to promote an exchange of experiences and to provide appropriate coordination. As noted by the Government during the PRSD exercise, UNFPA would take the lead role in coordinating donor assistance in the population field, assisting the Government through continued contact with other external cooperation organizations, especially with the members of the Joint Consultative Group on Policy (JCGP) and the international and regional development banks.

Financial summary

68. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $5.5 million over the three-year period 1994-1996, of which $3.4 million would be programmed from UNFPA's regular resources. The table below shows how the programme would accommodate these two levels of funding:

	UNFPA regular resources $	Other resources $	TOTAL $
Maternal and child health and family planning	1,500,000	800,000	2,300,000
Information, education, and communication	500,000	-	500,000
Data collection and analysis	1,000,000	1,000,000	2,000,000
Population dynamics	100,000	150,000	250,000
Population policy formulation	100,000	-	100,000
Women, population and development	100,000	150,000	250,000
Programme reserve	100,000	-	100,000
Total	3,400,000	2,100,000	5,500,000

IV. RECOMMENDATION

69. The Executive Director recommends that the Executive Board approve the programme for Nicaragua as presented, subject to the availability of resources, and authorize the Executive Director to make the necessary arrangements for its management, funding and execution.